

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 0 8 6 5 1 0 0 0 5	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Douglas Aircraft Co. 190th & Normandie Ave. Torrance, CA 90502			A.State Manifest Document Number 84924320		B.State Generator's ID	
4. Generator's Phone (213 533-6677			C.State Transporter's ID		D.Transporter's Phone	
5. Transporter 1 Company Name J. C. Liquid Waste Disposal			6. US EPA ID Number C A D 0 5 8 0 1 8 3 6 7		E.State Transporter's ID	
7. Transporter 2 Company Name			8. US EPA ID Number		F.Transporter's Phone	
9. Designated Facility Name and Site Address IT Corp 896 Waterbird Way Martinez, CA 94553			10. US EPA ID Number C A D 0 0 0 0 9 4 7 7 1		G.State Facility's ID CH0000094771	
			H.Facility's Phone 415 228-5100			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12.Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. Waste Acid Liquid NOS Corrosive NA1760			001	TT	2500	G
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above Sulfuric Acid 13% Sodium Dichromate 4.5% Water 22.5%			K.Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information Guide #60 Use gloves, goggles, respirator - May cause severe burns to skin & eyes. IT Profile 12713						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.						
Printed/Typed Name Donald C. Gerber			Signature		Date Month Day Year	
17. Transporter 1 Acknowledgement of Receipt of Materials			Printed/Typed Name #56383		Signature	
18. Transporter 2 Acknowledgement of Receipt of Materials			Printed/Typed Name		Signature	
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name R. Meadows			Signature		Date Month Day Year	